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16018 U.S.PTO
10/7/03

121203

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 6453P019

First Inventor Yasuhiro, II

Title METHOD OF DISPLAYING A THUMBNAIL IMAGE, SERVER COMPUTER, AND CLIENT COMPUTER

Express Mail Label No. EV 409362422 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:
 Mail Stop Patent Application
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) *[Total Sheets 15]*
5. Oath or Declaration (signed) *[Total Pages 4.]*
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 18 completed)
 i. DELETION OF INVENTOR(S)
Signed statement attached deleting Inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76
7. CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. Computer Readable Form (CRF)
 b. Specification Sequence Listing on:
 i. CD-ROM or CD-R (2 copies); or
 ii. paper
 c. Statements verifying identity of above copies
9. Assignment Papers (cover sheet & document(s))
10. 37 C.F.R. § 3.73(b) Statement Power of Attorney
(when there is an assignee)
11. English Translation Document *(if applicable)*
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment Application Amended to Reflect Claim of Priority
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
 Applicant must attach form PTO/SB/35 or its equivalent.
17. Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-In-part (CIP)

of prior application No: _____

Prior application Information: Examiner _____

Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS Customer Number

08791

or Correspondence address below

Name	Michael J. Mallie Blakely, Sokoloff, Taylor & Zafman LLP				
Address	12400 Wilshire Boulevard, 7th Floor				
City	Los Angeles	State	California	Zip Code	90025
Country	USA	Telephone	(408) 720-8300	Fax	(408) 720-8383

Name (Print/Type) Michael J. Mallie

Registration No. (Attorney/Agent)

36,591

Signature

Date

10/7/03

121203


FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT	(\\$) 942.00
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Complete if Known	
Application Number	To be assigned
Filing Date	December 19, 2003
First Named Inventor	Yasuhiro, II
Examiner Name	To be assigned
Group/Art Unit	To be assigned
Attorney Docket No.	6453P019

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number **02-2666**

Deposit Account Name **Blakely, Sokoloff, Taylor & Zafman LLP**

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	770.00
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)		(\\$) 770.00			

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
12	20*	0	x 18.00	\\$0.00
5	3*	2	x 88.00	\\$172.00

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple Dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\\$) 172.00			

*or number previously paid, if greater. For Reissues, see below

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\\$)

Complete (if applicable)

Name (Print/Type)	Michael J. Mallie	Registration No. (Attorney/Agent)	36,591	Telephone	(408) 720-8300
Signature				Date	12/14/03

Based on PTO/SB/17 (08-03) as modified by Blakely, Sokoloff, Taylor & Zafman (M) 08/11/2003.
SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

DEPOSIT CERTIFICATE

Attorney Docket No.: 006453.P019

Return Deposit Certificate to: Debbie Riggio
(Name)

"Express Mail" Label Number: EV 409362422 US

Date of Deposit: December 12, 2003

I hereby certify that this package is being deposited by the undersigned with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this package has been addressed to (put check or X on the appropriate line):

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2900 Crystal Drive
Arlington, Virginia 22202-3514

(Typed or Printed Name of Person Depositing Package)

(Signature of Person Depositing Package)

(Date Signed)